

# ST. XAVIER'S COLLEGE MAHUADANR

Estd: 2011. Affiliated to Nilamber-Pitamber University, MedininagarNPU/R/953/11
P.O- Mahuadanr, Dist.Latehar, Jharkhand 822119
Accredited with 'B' Grade by NAAC
AISHE-C-42763 ISO-9001:2015

Phone: 08986638271/08987890754 Email:sxcmdanr@gmail.com website:www.sxcm.co.in

### MEMORANDUM OF UNDERSTANDING

## Between

## St. Xavier's College, Mahuadanr

### And

## Government Hospital, Mahuadanr

This Memorandum of Understanding (hereinafter referred to as "MoU") is executed between St. Xavier's College, Mahuadanr (hereinafter referred to as "SXCM"), a College whose address is at Mahuadanr, Latehar-822119, Jharkhand and shall include its lawful representatives and permitted assigns; and Government Hospital, Mahuadanr a Government Hospital whose address is Mahuadanr, Latehar-822119, Jharkhand and shall include its lawful representatives and permitted assigns; (hereinafter referred to as singularly as "The Party" and collectively as "The Parties").

#### WHEREAS

- A. **SXCM** is an established College with a track record of educational excellence and research and with a dynamic programme of collaborative arrangements with many institutions of Colleges, Schools, Hospitals & Industries.
- B. Government Hospital is an established and Old hospital which strives to provide and meets the medical needs of the local people with timely care and renders service to different nearby villages.
- C. The Parties are desirous of entering this MoU to declare their respective intentions and to establish a basis of cooperation and collaboration between the Parties upon the terms as contained herein.



#### NOW THIS MOU WITNESSES AS FOLLOWS:

#### **OBJECTIVE**

The Parties, subject to the terms of this MoU from time to time in force in each party's place, shall endeavor to strengthen, promote and develop outreach programs, provide to students Internship and cooperate between the Parties on the basis of equality and mutual benefit.

## **AREAS OF COOPERATION**

The Parties agree to encourage the following activities, in particular, to promote academic cooperation in the following areas:

- a) Institutional exchanges between faculty and staff from each partner institution;
- Acceptance of undergraduate students of SXCM institution for periodsof study and/or research;
- c) Organizing health related programs in the college as well as in the nearby villages.
- d) Exchange of information pertaining to developments
- e) Cooperation in any other areas as agreed to by the Parties from time to time; and
- f) The Parties will mutually promote information and activities of partner institutions within the MoU.

#### ENTRY INTO EFFECT AND DURATION

- This MoU shall become effective as of the date of signatures of both parties, or if the dates vary, then the date of the later signature.
- This MoU shall remain in effect for a period of five (5) years.
- This MoU may be extended for such further period as may be agreed in writing by both parties.
- If the MoU is not renewed by mutual consent, the MoU shall conclude at the end of the specified period, or after activities in progress have concluded.

## REVISION, VARIATION AND AMENDMENT

- Either party may request in writing a revision, variation or amendment of this MoU with an approval
  of other party.
- Any such revision, variation or amendment agreed to by The Parties shall be in writing and shall form part of this MoU.

• Such revision, variation or amendment shall come into force on such date as may be determined by

the Parties.

• Any revision, variation or amendment shall not prejudice the implementation of any project, activity

or co-operation arising from or based on this MoU before or up to the date of such revision,

variation or amendment.

**TERMINATION** 

This MoU may be terminated by either party with a minimum of ninety (90) days written notice to the other

party. Activities in progress at the time of termination of this MoU shall be permitted to conclude as

planned unless otherwise agreed.

**NOTICES** 

Any communication under this MoU shall be in writing in the English language and delivered by registered

mail to the address or sent to the electronic mail address or facsimile number of the institutions as the case

may be, shown below or to such other address or electronic, mail address or facsimile number as either

Party may have notified the other Party and shall, unless otherwise provided herein, be deemed to be duly

given or made when delivered to the recipient at such address or electronic mail address or facsimile

number which is duly acknowledged:

IN WITNESS WHEREOF, signed in original on 11th June 2020 in two (2) original texts, bothtexts being

equally authentic.

St. SIGNED BY

for and on behalf of SXCM

Date: 10th June 2020

SIGNED BY

for and on behalf of Governmen

Hospital, Mahuadanr

Date: 11th June 2020